

(GW/UST-3)

## Notice of Intent: UST Permanent Closure or Change-In-Service

RECEIVED  
N.C. Dept. of ENVIRONMENTALFOR  
TANKS  
IN  
NC

## Return Completed Form To:

The appropriate DEM Regional Office according to the county of the facility's location. [SEE REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL OFFICE ADDRESS].

State Use Only

I. D. Number

FEB 24 1994

Date Received

Winston-Salem

Regional Office

## INSTRUCTIONS

Complete and return thirty (30) days prior to closure or change-in-service.

## I. OWNERSHIP OF TANK(S)

Tank Owner Name: NORTHSTATE CHEVROLET  
(Corporation, Individual, Public Agency, or Other Entity)Street Address: 451 NORTH EUGENE STCounty: GUILFORDCity: GREENSBORO State: N.C. Zip Code: 27402Tele. No. (Area Code): 910 379 8887

## II. LOCATION OF TANK(S)

Facility Name or Company: NORTHSTATE CHEVROLET

Facility ID # (if available)

Street Address or State Road: 451 NORTH EUGENE STCounty: GUILFORD City: GREENSBORO Zip Code: 27402Tele. No. (Area Code): 910 379 8787

## III. CONTACT PERSON

Name: JERRY MCPHERSON Job Title: SERVICE MANAGER Telephone Number: (910) 379-8787

## IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN-SERVICE

1. Contact Local Fire Marshall.
2. Plan the entire closure event.
3. Conduct Site Soil Assessments.
4. If Removing Tanks or Closing in Place refer to API Publications. 2015 "Cleaning Petroleum Storage Tanks" & 1604 "Removal & Disposal of Used Underground Petroleum Storage Tanks".

5. Provide a sketch locating piping, tanks and soil sampling locations.
6. Fill out form GW/UST-2 "Site Investigation Report for Permanent Closure" and return within 30 days following the site investigation.
7. Keep records for 3 years.

## V. WORK TO BE PERFORMED BY:

(Contractor) Name: Eaton's petroleum service INC.Address: PO. BOX 159 GERMANTON State: N.C.Zip Code: 27019Contact: CLAYTON EATONPhone: 910 969-9815

## VI. TANK(S) SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE

TANK ID#	TANK CAPACITY	LAST CONTENTS	PROPOSED ACTIVITY		
			CLOSURE		CHANGE-IN-SERVICE
			Removal	Abandonment In Place	New Contents Stored
<u>1</u>	<u>550</u>	<u>WASTE OIL</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	

## VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

Print name and official title

\*Scheduled Removal Date: MARCH 25, 94

Signature: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

\*If scheduled work date changes, notify your appropriate DEM Regional Office 48 hours prior to originally scheduled date.